

UNITED STATES DEPARTMENT OF EDUCATION

OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

FEB 1 2 2002

Kelly C. Wilson, Esq. Grippo & Elden 227 West Monroe Street Suite 3600 Chicago, Illinois 60606

Dear Ms. Wilson:

This letter is in response to your letter requesting clarification under Part C of the Individuals with Disabilities Education Act on issues concerning the content of individualized family service plans (IFSPs). I apologize for the delayed response. I had thought that no further response was necessary after the extensive telephone discussions regarding your inquiry. However, you have indicated that you would like our advice confirmed in writing. You asked whether an IF\$P team is "allowed to determine that an individual child needs a specific therapy or specific methodology, e.g., neurodevelopmental therapy ("NDT"), Applied Behavioral Analysis ("ABA") or cued speech, in order for that child to benefit from early intervention services?" You further asked: "if an IF\$P team determines that a child's unique needs require that a specific therapy or specific methodology be used in order for that child to benefit from early intervention service, should the IF\$P team include that therapy or methodology on the child's IF\$P?" In your final question you asked whether, if the answer to either of the first two questions is yes, the State is then required to provide the identified therapy or methodology:

The Part C regulations provide that an IFSP must include a statement of the specific early intervention services necessary to meet the unique needs of the child and the family to achieve the outcomes identified for each child and family. 34 CFR §303.344(d). The term "early intervention services" is defined in part as services that are "designed to meet the developmental needs of each child eligible under this part and the needs of the family related to enhancing the child's development...." 34 CFR §303.12(a). The regulations do not contain an exhaustive list of the types of services included under "early intervention services." See §303.12(d). A State cannot exclude from the IFSP team's consideration services that meet the needs of the child, based on his or her assessment, and that meet this Federal definition.

The statement of services in the IFSP must include the frequency, intensity, and method of delivering the service, the natural environments in which early intervention services will be provided, the location of the services, and the payments arrangements, if any. The term "method" means how a service is provided. 34 CFR §303.344(d). There are many different "methods" of providing services, such as one-on-one vs. group therapy, or consultative vs. direct services. The term "method" could also include a "methodology" such as cued speech.

Whether a specific methodology should be addressed in an IFSP is an IFSP team decision, and depends on the needs of the individual child. For many children, the IFSP may not need to address a specific approach, because the general description of the service, e.g., "physical therapy," suffices to address the child's need.

In some cases, under the current regulations, in order to meet the child's unique needs the IFSP team may consider a particular methodology or instructional approach to be integral to the design of an "individualized" program of services for the child. In such cases it would be appropriate for the IFSP team to list that specific methodology on the IFSP.

After an IFSP has been completed and the parents consent to the provision of the identified services, the State is required to provide all services identified on the child's IFSP and to ensure that those services are implemented according to the IFSP. Thus, if the IFSP includes a specific methodology or approach, the State would need to ensure that services are provided as stated in the child's IFSP.

We hope that this information provides helpful clarification on these issues. If you need further information, please contact Mary Louise Dirrigl at 202-260-9490.

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Sincerely,

Patricia J. Guard Acting Director,

Office of Special Education Programs

cc: Janet Gully, Acting Bureau Chief Part C Coordinator